

DILLON YUDELL LLP
ATTORNEYS AT LAW

RECEIVED
CENTRAL FAX CENTER

OCT 12 2005

USPTO FACSIMILE TRANSMITTAL SHEET

TO:	FROM:	
OIPE	James E. Boice, Reg. No. 44,545	
ORGANIZATION:	DATE:	
US Patent and Trademark Office	October 12, 2005	
ART UNIT:	CONFIRMATION NO.:	TOTAL NO. OF PAGES INCLUDING COVER:
2171		2
FAX NUMBER:	APPLICATION SERIAL NO.:	
571-273-8300	10/759,932	
ENCLOSED:	ATTORNEY DOCKET NO.:	
Change of Correspondence Address	AUS92030846US1	

☒ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

This fax from the law firm of Dillon & Yudell LLP contains information that is confidential or privileged, or both. This information is intended only for the use of the individual or entity named on this fax cover letter. Any disclosure, copying, distribution or use of this information by any person other than the intended recipient is prohibited. If you have received this fax in error, please notify us by telephone immediately at 512.343.6116 so that we can arrange for the retrieval of the transmitted documents at no cost to you.

8911 N. CAPITAL OF TEXAS HWY., SUITE 2110, AUSTIN, TEXAS 78759
512.343.6116 (V) • 512.343.6446 (F) • DILLONYUDELL.COM

PTO/SB/122 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i>		Application Number		10/759,932	
<i>Address to:</i> Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		Filing Date		January 16, 2004	
		First Names Inventor		Chakravarty, et al.	
		Art Unit		2171	
		Examiner Name		Not yet assigned	
		Attorney Docket Number		AUS920030846US1	
Please change the Correspondence Address for the above-identified patent application to:					
Customer Number : 45502					
OR					
Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).					
I am the:					
<input type="checkbox"/> Applicant/Inventor					
<input type="checkbox"/> Assignee of record of the entire interest.					
<input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
<input checked="" type="checkbox"/> Attorney or Agent of record. Registration Number <u>James E. Boice, Reg. No. 44,545.</u>					
<input type="checkbox"/> Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.					
Typed or Printed Name <u>James E. Boice</u>					
Signature <u>[Signature]</u>					
Date <u>October 12, 2005</u>				Telephone <u>512.343.6116</u>	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
<input type="checkbox"/> Total of <u>1</u> forms are submitted.					

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.